



SSUC Chair Yoga Feedback Form Pg.1

Feedback on the Instructor:

Were they informative, kind, adaptable? Were they easy to hear? Please include as much detail as possible

Feedback on the difficulty of the class:

Were you able to follow the instructions? Were any poses too confusing? Please include as much detail as possible

Feedback on how you felt in this class:

Did you feel safe, included, listened to? Was the class fun, or relaxing? Do you feel connected to community? Please include as much detail as possible

SSUC Chair Yoga Feedback Form Pg.2

Has this class affected your health in any way?

Do you find you have improved mobility? Have any of your condition's symptoms improved (like arthritis, fibromyalgia, bursitis, etc.)? Has any pain lessened? Please include as much detail as possible

Do you have any suggestions for changes that can be made to the class?

Do the lights need to be dimmer? Is the music too loud? Was the class too crowded? Please include as much detail as possible

Thank you for your attendance and your support in filling this form out! This will help us provide the best experience possible to all participants

This Chair Yoga Program has been made available through grant funds awarded by the Arthritis Society of Canada

